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CNC CHARLESTON
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WATER WELL RECORDS FOR FUEL DISTRIBUTION SYSTEM (FDS) AREA 8 TANK 3917
CNC CHARLESTON SC
10/23/2002
ENVIRONMENTAL ENTERPRISE GROUP



Environmental & Construction Services

Environmental Enterprise Group, Inc.
1345 Barracks Rd.
North Charleston, SC 29405
TEL (843) 202-8008
FAX (843) 202-8001
<http://www.eeginc.net>

Ser 319
October 23, 2002

RECEIVED
OCT 25 2002
Water Monitoring, Assessment &
Protection Division

Mr. Michael Bishop
Bureau of Water
2600 Bull Street
Columbia, SC 29201-1708

Re: Charleston Naval Complex FDS Monitoring Wells abandoned at SC DHEC Site #01183

Dear Mr. Bishop,

Please find enclosed Water Well Records, DHEC form 1903, for the Monitoring Wells listed below that have been abandoned at Area 8 of the Charleston Naval Complex Fuel Distribution System. EEG, Inc. was requested to forward these forms for work performed under a contractual agreement with CH2M-Jones, LLC.

SC DHEC # 01183
Area 8
FDSGW08A
FDSGW08B
FDSGW08C
FDSGW08D

If there are any questions or if more information is needed, please contact Leonard DiAsio at (843) 202-8082.

Sincerely,

Leonard DiAsio

Encl.: DHEC form 1903, Water Well Records

Cc: Mr. Paul Bergstrand, RCRA Hydrology Section, Bureau of Land and Waste Management, 2600 Bull St., Columbia, SC 29201-1708



Water Well Record Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 734-5300

1. LOCATION OF WELL:

County: Charleston

System Name:

Latitude:

Longitude:

Distance and Direction from Road Intersections:

Street Address & City of Well Viaduct Road, N. Chas.

Sketch Map:

Well Number: FDSGW08A

See attached map for well location.

2. CUTTING SAMPLES: ☐ Yes ☐ No

Geophysical Logs: ☐ Yes (please enclose) ☐ No

Formation Description

*Thickness
of
Stratum

Depth to
Bottom of
Stratum

RECEIVED
OCT 25 2002

Water Monitoring, Assessment &
Protection Division

ABANDONED V. 2.1.10.00 10/11/02

*Indicate Water Bearing Zones

(Use a 2nd sheet if needed)

3. REMARKS:

Zone G, FDS Area 08, near tank 3917,
SC DHEC # 01183

4. OWNER OF WELL: Department of the Navy
Address:

Telephone No.:

Engineer:

Address:

Telephone No.:

5. WELL DEPTH (completed)

Date Started:

Date Completed:

_____ ft.

6. ☐ Mud Rotary

☐ Jetted

☐ Bored

☐ Dug

☐ Air Rotary

☐ Driven

☐ Cable tool

☐ Other

7. USE:

☐ Domestic

☐ Public Supply-Permit No. _____

☐ Industry

☐ Irrigation

☐ Air Conditioning

☐ Commercial

☐ Test Well

☒ Monitor Well

☐

8. CASING: ☐ Threaded ☐ Welded

Diam.:

Type: ☐ PVC

☐ Galvanized

☐ Steel

☐ Other

_____ in. to _____ ft. depth

_____ in. to _____ ft. depth

Height: Above/Below

Surface _____ ft.

Weight _____ lb./ft.

Drive Shoe? ☐ Yes ☐ No

9. SCREEN

Type: _____

Diam.: _____

Slot/Gauge: _____

Length: _____

Set Between: _____ ft. and _____ ft.

_____ ft. and _____ ft.

NOTE: MULTIPLE SCREENS
USE SECOND SHEET

Sieve Analysis ☐ Yes (please enclose) ☐ No

10. STATIC WATER LEVEL

_____ ft. below land surface after 24 hours

11. PUMPING LEVEL Below Land Surface.

_____ ft. after _____ hrs. Pumping _____ G.P.M.

Pumping Test: ☐ Yes (please enclose) ☐ No

Yield: _____

12. WATER QUALITY

Chemical Analysis ☐ Yes ☐ No

Bacterial Analysis ☐ Yes ☐ No

Please enclose lab results.

13. ARTIFICIAL FILTER (gravel pack) ☐ Yes ☐ No

Installed from _____ ft. to _____ ft.

Effective size _____ Uniformity Coefficient _____

14. WELL GROUTED? ☐ Yes ☐ No

☒ Neat Cement ☐ Sand Cement ☐ Concrete ☐ Other _____

Depth: From _____ ft. to _____ ft.

15. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction

_____ Type well disinfected ☐ Yes Type: _____

upon completion ☐ No Amount: _____

16. PUMP: Date installed: _____ Not installed ☒

Mfr. Name: _____ Model No.: _____

H.P. _____ Volts _____ Length of drop pipe _____ ft. Capacity _____ gpm

TYPE: ☐ Submersible ☐ Jet (shallow) ☐ Turbine

☐ Jet (deep) ☐ Reciprocating ☐ Centrifugal

17. WATER WELL CONTRACTOR'S CERTIFICATION: This well was drilled under
my direction and this report is true to the best of my knowledge and belief.

Registered Business Name: EEG, Inc.

Date: 10/11/02

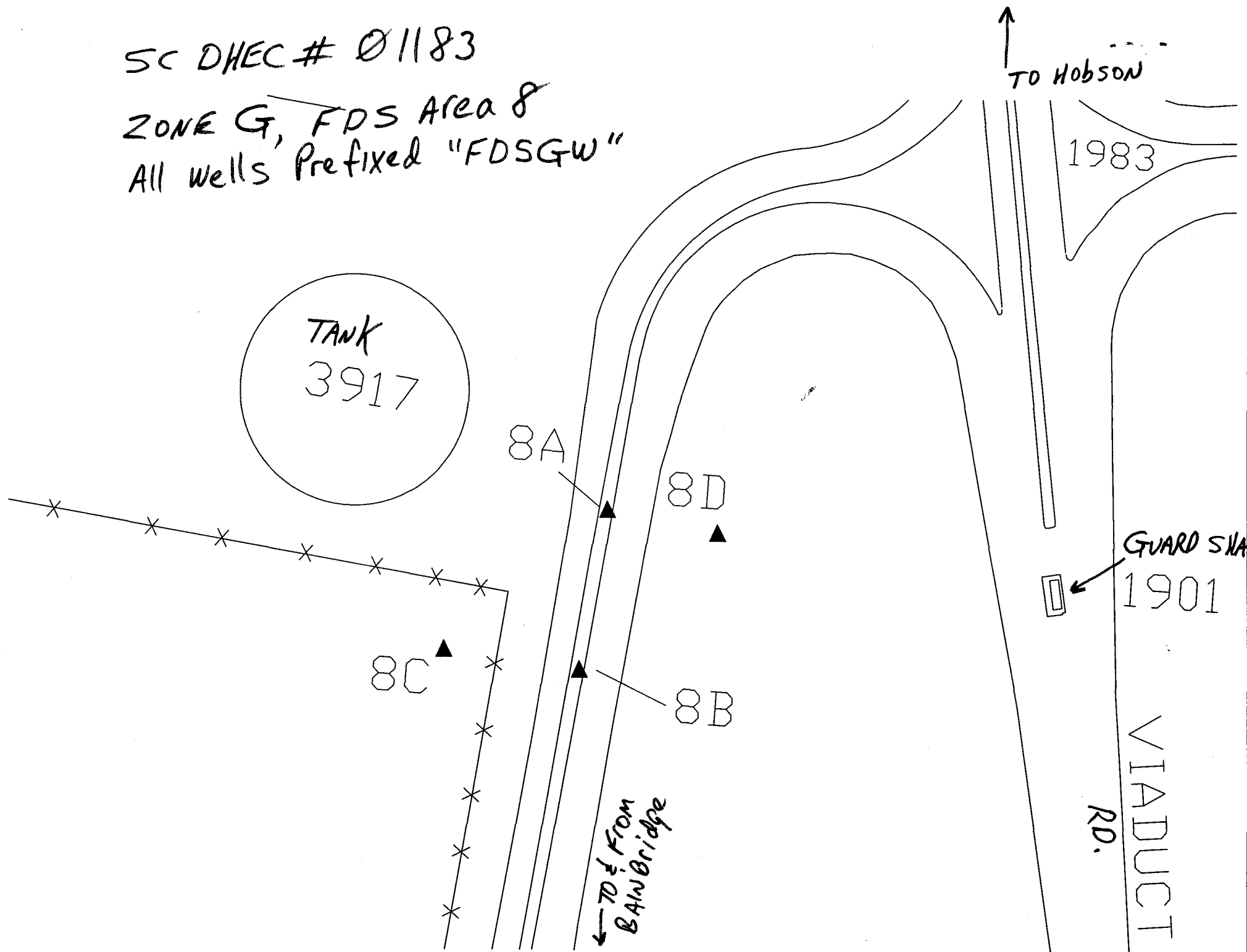
Address: 1345 Barracks Rd., N. Charleston, SC 29405

Signed: _____
Authorized Representative

Cert. No.: 1315

SC DHEC # 01183

ZONE G, FDS Area 8
All wells Prefixed "FDSGW"





Water Well Record Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 734-5300

1. LOCATION OF WELL:

County: Charleston

System Name:

Latitude:

Longitude:

Distance and Direction from Road Intersections:

Street Address & City of Well Viaduct Road, N. Chas.

Sketch Map:

Well Number: FDSGW08B

See attached map for well location.

2. CUTTING SAMPLES: ☐ Yes ☐ No

Geophysical Logs: ☐ Yes (please enclose) ☐ No

Formation Description

*Thickness
of
Stratum

Depth to
Bottom of
Stratum

RECEIVED
OCT 25 2002

Water Monitoring, Assessment &
Protection Division

ABANDONED 12-22-02 10/11/02

*Indicate Water Bearing Zones

(Use a 2nd sheet if needed)

3. REMARKS:

Zone G, FDS Area 08, near tank 3917,
SC DHEC # 01183

4. OWNER OF WELL: Department of the Navy
Address:

Telephone No.:

Engineer:

Address:

Telephone No.:

5. WELL DEPTH (completed)

Date Started:

Date Completed:

6. ☐ Mud Rotary ☐ Jetted
☐ Air Rotary ☐ Driven

☐ Bored ☐ Dug
☐ Cable tool ☐ Other

7. USE:

☐ Domestic ☐ Public Supply-Permit No. ☐ Industry
☐ Irrigation ☐ Air Conditioning ☐ Commercial
☐ Test Well ☒ Monitor Well ☐

8. CASING: ☐ Threaded ☐ Welded

Diam.:

Type: ☐ PVC ☐ Galvanized
☐ Steel ☐ Other

_____ in. to _____ ft. depth
_____ in. to _____ ft. depth

Height: Above/Below

Surface _____ ft.
Weight _____ lb./ft.

Drive Shoe? ☐ Yes ☐ No

9. SCREEN

Type: _____ Diam.: _____

Slot/Gauge: _____ Length: _____

Set Between: _____ ft. and _____ ft. **NOTE: MULTIPLE SCREENS
USE SECOND SHEET**

Sieve Analysis ☐ Yes (please enclose) ☐ No

10. STATIC WATER LEVEL

_____ ft. below land surface after 24 hours

11. PUMPING LEVEL Below Land Surface.

_____ ft. after _____ hrs. Pumping _____ G.P.M.

Pumping Test: ☐ Yes (please enclose) ☐ No

Yield: _____

12. WATER QUALITY

Chemical Analysis ☐ Yes ☐ No Bacterial Analysis ☐ Yes ☐ No

Please enclose lab results.

13. ARTIFICIAL FILTER (gravel pack) ☐ Yes ☐ No

Installed from _____ ft. to _____ ft.

Effective size _____ Uniformity Coefficient _____

14. WELL GROUTED? ☐ Yes ☐ No

☒ Neat Cement ☐ Sand Cement ☐ Concrete ☐ Other _____

Depth: From _____ ft. to _____ ft.

15. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction

_____ Type well disinfected ☐ Yes Type: _____

upon completion ☐ No Amount: _____

16. PUMP: Date installed: _____ Not installed ☒

Mfr. Name: _____ Model No.: _____

H.P. _____ Volts _____ Length of drop pipe _____ ft. Capacity _____ gpm

TYPE: ☐ Submersible ☐ Jet (shallow) ☐ Turbine
☐ Jet (deep) ☐ Reciprocating ☐ Centrifugal

17. WATER WELL CONTRACTOR'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Registered Business Name: EEG, Inc.

Date: 10/11/02

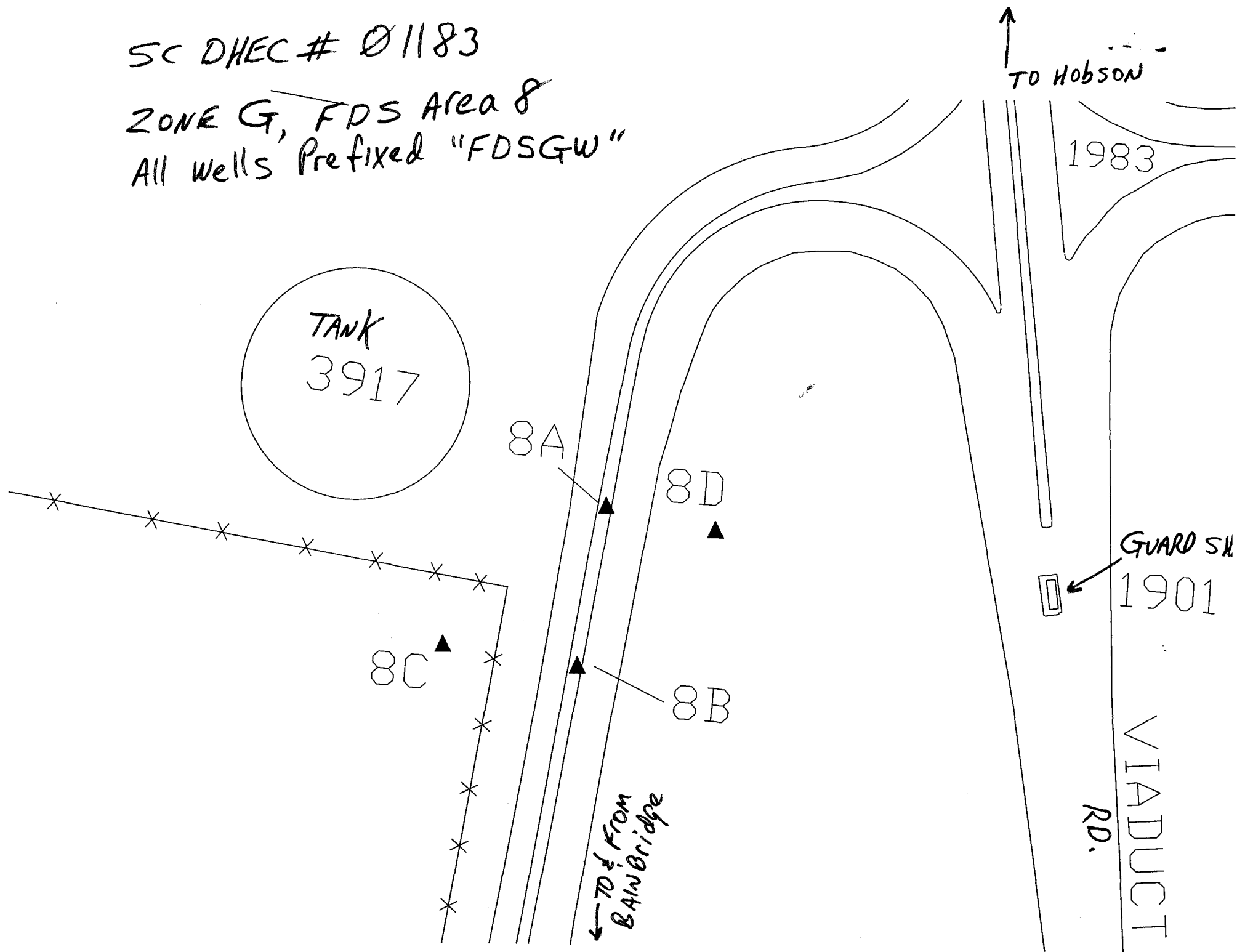
Address: 1345 Barracks Rd., N. Charleston, SC 29405

Signed: _____
Authorized Representative

Cert. No.: 1315

SC DHEC # 01183

ZONE G, FDS Area 8
All wells Prefixed "FDSGW"





Water Well Record Bureau of Water

2600 Bull Street, Columbia, SC 29201-1708; (803) 734-5300

1. LOCATION OF WELL:

County: Charleston

System Name:

Latitude:

Longitude:

Distance and Direction from Road Intersections:

Street Address & City of Well Viaduct Road, N. Chas.

Sketch Map:

Well Number: FDSGW08C

See attached map for well location.

2. CUTTING SAMPLES: ☐ Yes ☐ No

Geophysical Logs: ☐ Yes (please enclose) ☐ No

Formation Description

*Thickness
of
Stratum

Depth to
Bottom of
Stratum

4. OWNER OF WELL: Department of the Navy
Address:

Telephone No.:

Engineer:

Address:

Telephone No.:

5. WELL DEPTH (completed)

Date Started:

Date Completed:

6. ☐ Mud Rotary

☐ Jetted

☐ Bored

☐ Dug

☐ Air Rotary

☐ Driven

☐ Cable tool

☐ Other

7. USE:

☐ Domestic

☐ Public Supply-Permit No. _____

☐ Industry

☐ Irrigation

☐ Air Conditioning

☐ Commercial

☐ Test Well

☒ Monitor Well

☐

8. CASING: ☐ Threaded ☐ Welded

Diam.:

Type: ☐ PVC

☐ Galvanized

☐ Steel

☐ Other

_____ in. to _____ ft. depth

_____ in. to _____ ft. depth

Height: Above/Below

Surface _____ ft.

Weight _____ lb./ft.

Drive Shoe? ☐ Yes ☐ No

9. SCREEN

Type: _____

Diam.:

Slot/Gauge: _____

Length: _____

Set Between: _____ ft. and _____ ft.

_____ ft. and _____ ft.

NOTE: MULTIPLE SCREENS
USE SECOND SHEET

Sieve Analysis ☐ Yes (please enclose) ☐ No

10. STATIC WATER LEVEL

_____ ft. below land surface after 24 hours

11. PUMPING LEVEL Below Land Surface.

_____ ft. after _____ hrs. Pumping _____ G.P.M.

Pumping Test: ☐ Yes (please enclose) ☐ No

Yield: _____

12. WATER QUALITY

Chemical Analysis ☐ Yes ☐ No

Bacterial Analysis ☐ Yes ☐ No

Please enclose lab results.

13. ARTIFICIAL FILTER (gravel pack) ☐ Yes ☐ No

Installed from _____ ft. to _____ ft.

Effective size _____ Uniformity Coefficient _____

14. WELL GROUTED? ☐ Yes ☐ No

☒ Neat Cement ☐ Sand Cement ☐ Concrete ☐ Other _____

Depth: From _____ ft. to _____ ft.

15. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction

_____ Type well disinfected ☐ Yes Type: _____

upon completion ☐ No Amount: _____

16. PUMP: Date installed: _____ Not installed ☒

Mfr. Name: _____ Model No.: _____

H.P. _____ Volts _____ Length of drop pipe _____ ft. Capacity _____ gpm

TYPE: ☐ Submersible ☐ Jet (shallow) ☐ Turbine

☐ Jet (deep) ☐ Reciprocating ☐ Centrifugal

17. WATER WELL CONTRACTOR'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.

Registered Business Name: EEG, Inc.

Date: 10/11/02

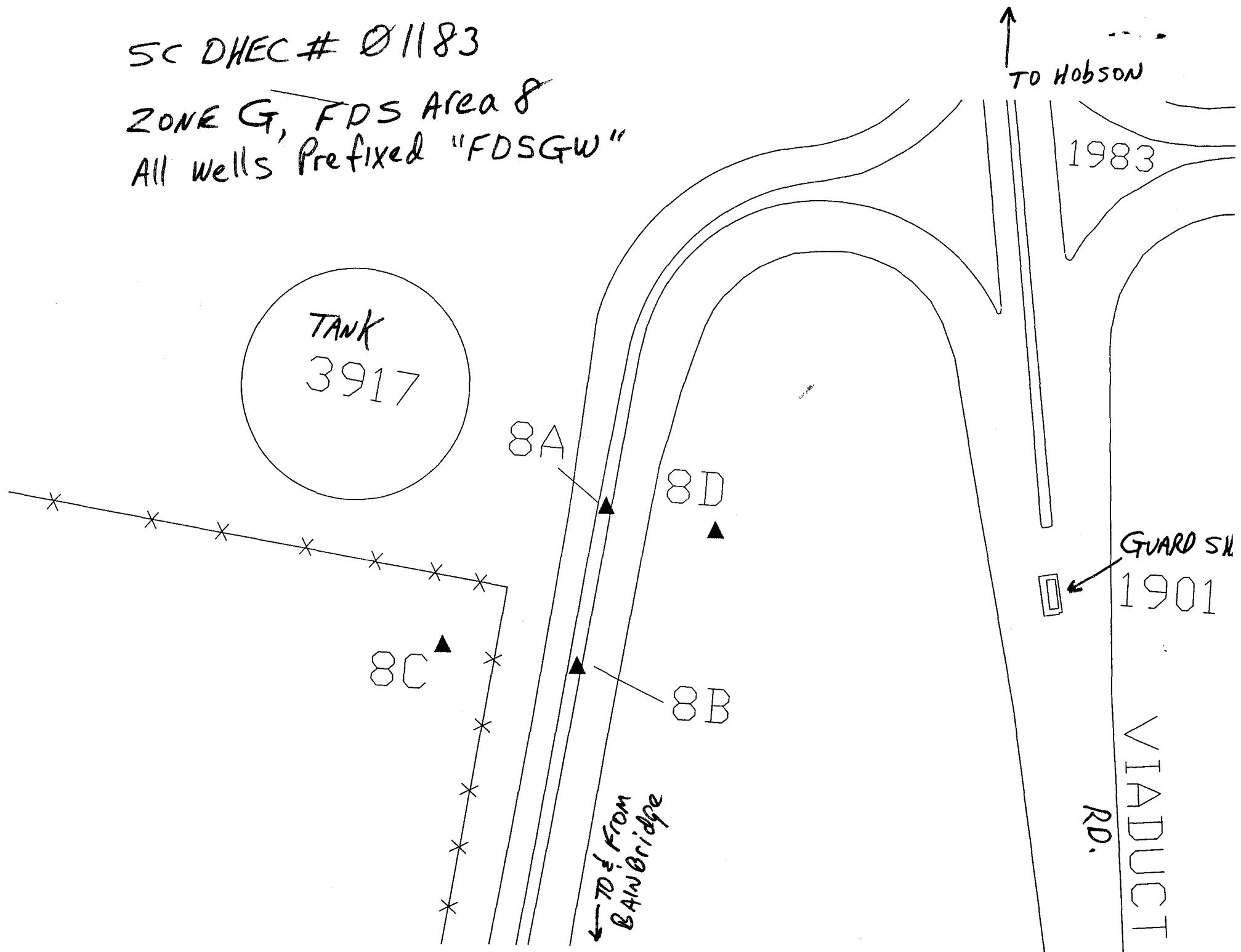
Address: 1345 Barracks Rd., N. Charleston, SC 29405

Signed: _____ Cert. No.: 1315

Authorized Representative

SC DHEC # 01183

ZONE G, FDS Area 8
All wells Prefixed "FDSGW"





Water Well Record
Bureau of Water
2600 Bull Street, Columbia, SC 29201-1708; (803) 734-5300

1. LOCATION OF WELL:

County: Charleston

System Name:

Latitude:

Longitude:

Distance and Direction from Road Intersections:

Street Address & City of Well Viaduct Road, N. Chas.

Sketch Map:

Well Number: FDSGW08D

See attached map for well location.

2. CUTTING SAMPLES: ☐ Yes ☐ No

Geophysical Logs: ☐ Yes (please enclose) ☐ No

Formation Description

*Thickness
of
Stratum

Depth to
Bottom of
Stratum

4. OWNER OF WELL: Department of the Navy

Address:

Telephone No.:

Engineer:

Address:

Telephone No.:

5. WELL DEPTH (completed)

Date Started:

Date Completed:

6. ☐ Mud Rotary

☐ Jetted

☐ Bored

☐ Dug

☐ Air Rotary

☐ Driven

☐ Cable tool

☐ Other

7. USE:

☐ Domestic

☐ Public Supply-Permit No. _____

☐ Industry

☐ Irrigation

☐ Air Conditioning

☐ Commercial

☐ Test Well

☐ Monitor Well

☐

8. CASING: ☐ Threaded ☒ Welded

Diam.:

Type: ☐ PVC

☐ Galvanized

☐ Steel

☐ Other

_____ in. _____ ft. depth

_____ in. _____ ft. depth

Height: Above/Below

Surface _____ ft.

Weight _____ lb./ft.

Drive Shoe? ☐ Yes ☐ No

9. SCREEN

Type: _____

Diam.:

Slot Gauge: _____

Length: _____

Set Between: _____ ft. and _____ ft.

_____ ft. and _____ ft.

**NOTE: MULTIPLE SCREENS
USE SECOND SHEET**

Sieve Analysis ☐ Yes (please enclose) ☐ No

10. STATIC WATER LEVEL

_____ ft. below land surface after 24 hours

11. PUMPING LEVEL Below Land Surface.

_____ ft. after _____ hrs. Pumping _____ G.P.M.

Pumping Test: ☐ Yes (please enclose) ☐ No

Yield: _____

12. WATER QUALITY

Chemical Analysis ☐ Yes ☐ No

Bacterial Analysis ☐ Yes ☐ No

Please enclose lab results.

13. ARTIFICIAL FILTER (gravel pack) ☐ Yes ☐ No

Installed from _____ ft. to _____ ft.

Effective size _____ Uniformity Coefficient _____

14. WELL GROUTED? ☐ Yes ☐ No

☒ Neat Cement ☐ Sand Cement ☐ Concrete ☐ Other _____

Depth: From _____ ft. to _____ ft.

15. NEAREST SOURCE OF POSSIBLE CONTAMINATION: _____ ft. _____ direction

_____ Type well disinfected ☐ Yes Type: _____

upon completion ☐ No Amount: _____

16. PUMP: Date installed: _____ Not installed ☒

Mfr. Name: _____ Model No.: _____

H.P. _____ Volts _____ Length of drop pipe _____ ft. Capacity _____ gpm

TYPE: ☐ Submersible ☐ Jet (shallow) ☐ Turbine

☐ Jet (deep) ☐ Reciprocating ☐ Centrifugal

17. WATER WELL CONTRACTOR'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief

Registered Business Name: EEG, Inc.

Date: 10/14/02

Address: 1345 Barracks Rd., N. Charleston, SC 29405

Signed: _____ Cert. No.: 1315

Authorized Representative

SC DHEC # 01183

ZONE G, FDS Area 8
All wells Prefixed "FDSGW"

